



Fall 2020

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# NDA JOURNAL

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A Peer Reviewed Journal





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## NDA JOURNAL

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# NDA JOURNAL

FALL 2020

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## On the Cover

William Orr was martyred in a 1797 judicial lynching in Ulster, Ireland. This event was a precursor to the failed Irish Rebellion of 1798. "Remember Orr" became a rallying cry for the United Irishmen.



Daniel L. Orr II, DDS, MS (anesth), PhD, JD, MD  
EditorNDA@nvda.org

# Lives Matter, Refining the Validations

**D**isclaimer: I remain grateful for the privilege and responsibility of being the Editor of the *NDAJ* for these many years. The purpose of my editorials is to stimulate thought by documenting facts leading to my opinions. I do not seek to offend anyone and only want to improve the human condition, particularly our profession, as best I can. Understanding that, I humbly and cautiously offer the following for consideration, with good intent in these chaotic times. The *NDAJ* welcomes circumspect commentary from the readership.

In 2012, NRS 200.471 was codified, legally making dentists' lives matter, and more than many per criminal enhancements against those that would harm dentists. (Figure 1)

In 2013, the final examination in Jurisprudence at UNLV SDM analyzed

this law. Senior students considered the ramifications of a hypothetical physical confrontation between a dental student and a dentist. The students realized that they had, perhaps unfairly, not been included in the protected class. The next year the Nevada Legislature, upon petition by these former students, included dental and dental hygiene students in the protected classes of health professionals.

I suppose NRS 200.471 is nice, but what about others, like our patients, a group that includes pretty much everyone else? Shouldn't they be equally protected? George Orwell warned about those that are "more equal than others" in 1984.

Including dentists, or other groups, in hate crime type legislation may make some contemporary entry level

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## IT IS A CRIME TO COMMIT A VIOLENT ACT AGAINST A HEALTH CARE PROVIDER

**AN ACT relating to crimes; providing for an enhanced penalty for committing an assault or battery upon certain providers of health care; and providing other matters properly relating thereto.**

**NRS 200.471 (1) (a)** "Assault" means intentionally placing another person in reasonable apprehension of immediate bodily harm.

**NRS 200.481 (2) (a)** "Battery" means any willful and unlawful use of force or violence upon the person of another.

**NRS 200.471 (1) (c)** "Provider of health care" means a physician, a physician assistant, a practitioner of respiratory care, a homeopathic physician, an advanced practitioner of homeopathy, a homeopathic assistant, an osteopathic physician, an osteopathic physician's assistant, a podiatric physician, a podiatry hygienist, a physical therapist, a medical laboratory technician, an optometrist, a chiropractor, a chiropractor's assistant, a doctor of Oriental medicine, a nurse, a student nurse, a certified nursing assistant, a nursing assistant trainee, a dentist, a dental hygienist, a pharmacist, an intern pharmacist, an attendant on an ambulance or air ambulance, psychologist, a social worker, a marriage and family therapist and an emergency medical technician.



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DISTRICT ATTORNEY



Figure 1. NRS 200.471 (1)(c) placard



Figure 2. Adoptee Mary Alice Brown

sense. Without informed consent, dental procedures would generally be classified as criminal batteries. Our procedures can be painful, and are a source of never-ending material for comedians focused on the hilarity of the dental misery of others.<sup>1</sup> Dentists are often paid well for their efforts, which could certainly engender ill feelings.

Dentists are in unequal positions of power with regard to their patients. Our patients really do not know what we are doing, why we are doing it, why it has to hurt occasionally, and why it is so expensive. We do our best to explain things, but we are the ones doing the explaining, an inherent conflict of interest. All this is why the profession stresses ethics and morality in every patient interaction. Our patients' interests really should be above our own.

Here in Nevada, dentists have been assaulted, battered, and even murdered. Dr. George Monahan was

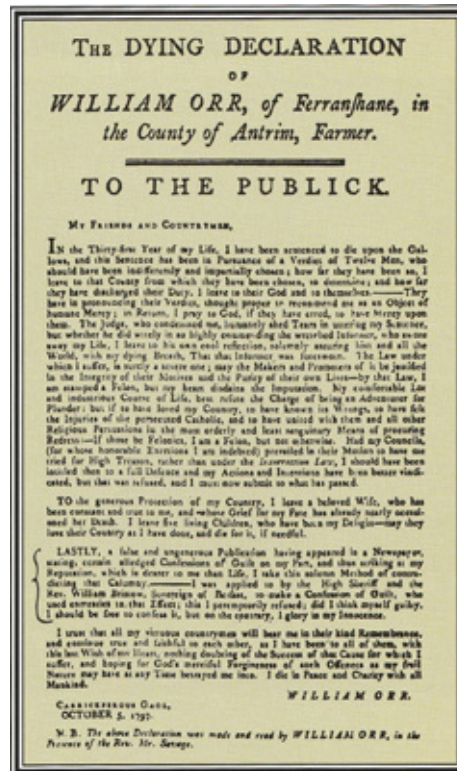


Figure 3. William Orr's Dying Delcaration. See the full text on page 6

murdered in 1980 by Samuel Howard, who remains on death row.<sup>2</sup> Dr. Diem Ha Smith was murdered at age 42 and no perpetrator has been identified. In 2016, thanks to the Second Amendment and the effective use of a legal firearm, dental office personnel successfully dealt with armed assailants and stopped the attack.<sup>3</sup>

But, perhaps enhanced worth of one group, such as dentists, over another should not be the case? In my own ancestry are progenitors known to have suffered at the hands of others. I offer the following family history not as a singular circumstance, but as representative of all of us if we look back far enough.

I am descended from African slaves, centuries prior to the more modern time frame covered by Simon Webb.<sup>4</sup>

My 12th great grandfather George Soule, an indentured servant, immigrated to America on the Mayflower in 1620. In some ways indentured

servitude was worse than slavery. 12 of 20 indentured servants on the Mayflower died within a year of the Plymouth landing.<sup>5</sup> Several scriptural admonitions warn against abusing hired servants, whom the employers could just as easily pay, house, feed, or not with virtual impunity. The Prodigal Son, famous in the Bible as a day laborer, was nigh unto starvation because he was not allowed to eat with the swine.<sup>6</sup> Further: "Thou shalt not oppress a hired servant that is poor and needy, whether he be of thy brethren, or of thy strangers that are in thy land within thy gates. At his day thou shalt give him his hire, neither shall the sun go down upon it; for he is poor, and setteth his heart upon it: lest he cry against thee unto the Lord, and it be sin unto thee."<sup>7</sup>

In 1838 Missouri Governor Lilburn Boggs issued an extermination order (leave or be exterminated) against members of my faith.<sup>8</sup> That order was not officially rescinded, with apology, until 1976.<sup>9</sup>

My great-grandmother Mary Alice Brown (Figure 2) was Cherokee, adopted by the Brown family after her biological parents suffered mightily on the Trail of Tears,<sup>10</sup> wherein 20,000 Cherokee and *their* 2,000 slaves were forced to evacuate the South even after prevailing in appeal to the United States Supreme Court. Andrew Jackson infamously opined: "Justice Marshall has made his decision, now let him enforce it."<sup>11</sup>

My Irish family came to the USA during the potato famine,<sup>12</sup> escaping death by starvation and their indentured servitude, possibly to some of my British ancestors. Irishman William Orr, was hung, martyred Nathan Hale style,<sup>13</sup> by British forces in 1797.<sup>14</sup> His dying declaration as a young father is poignant and representative for all who have unjustly suffered at the hands of others. (Figure 3)





“Remember Orr” became the Irish rallying cry during the failed 1798 Irish Rebellion.

Again, the Orrs do not present a unique family history. It is certain that all of us have ancestors which were abused by others, and doubtless, at times, were the abusers. Things should not be that way, but that is the historical reality of the world that continues today.

If everyone would adopt the principles of our professional codes of ethics, essentially always putting others' interests first, many of the problems we see in the world today would vanish.<sup>15</sup>

However, ancient groups discerned what was most important in human relationships millennia ago. Abraham (2,000 B.C.) is honored as the founder of three great religious peoples, the cousins named Jews, Christians, and Muslims. The holy texts of these faiths document clearly profound respect for the lives of others. Genesis 9:6: “Whoso sheddeth man’s blood, by man shall his blood be shed.” In Matthew 22:39 what is known as the second greatest commandment, or the Golden Rule states: “Thou shalt love thy neighbor as thyself.”<sup>16</sup> The Quran iterates that whomever saves the life of a human being has saved all of humanity, while whomever takes the life of another without just cause has killed all of humanity.<sup>17</sup> All echo that a Creator loves humankind equally, as in 2 Nephi 26:33: “...he inviteth them all to come unto him..he denieth none that come unto him, black and white, bond and free, male and female; and he remembereth the heathen, and all are alike unto God...”<sup>18</sup>

Political institutions throughout history have not been so magnanimous in theory or reality. But, America seems to be different.



Figure 4. The Editor and the Cuban craft from which refugees left moments before, Key West, FL, April 2004.

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**The Declaration of Independence states:  
“We hold these truths to be self-evident,  
that all men are created equal, that they  
are endowed by their Creator with certain  
unalienable rights, that among these are Life,  
Liberty and the pursuit of Happiness.”**

---

The Founders, building on the precepts of the faiths just mentioned, clearly stated that all Americans also have inherent legally recognized worth, especially compared any other civilization in the history of the world. The Declaration of Independence states: “We hold these truths to be self-evident, that all men are created equal, that they are endowed by their Creator with certain unalienable rights, that among these are Life, Liberty and the pursuit of Happiness.”

America is certainly not perfect, it never has been and never will be, but

the Founders committed us to the pursuit of perfection in human relationships, more so than other nation in history.

All U.S. Citizens have the historically singular, powerful, Constitutionally acknowledged and guaranteed inherent worth received by just being American. Our country has welcomed more immigrants into full citizenship than any other nation on earth.

As religiously prophesized and logically predicted since before the Founding, some foreign and even domestic

groups have reveled in their hate for America to the extent of expressing their feelings with murderous violence and destruction. Yet, wiser immigrants often risk everything, including their own lives, to continue to come to America. (Figure 4)

In addition to the American birthright worth of mortality, and the right to choose more than any other culture what we do for ourselves with the gift of life, in my opinion, that what makes individuals truly matter has nothing to do with fame, good looks, athletic or artistic talents, wealth, intelligence, race, religion, heritage, being an NRS protected dentist, or even being an American.

What truly makes our lives matter is how well we treat others.

The *NDAJ* welcomes circumspect commentary.

Fight On. 🍷

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# William Orr Dying Declaration, 1797

*As discussed in the Editor's Message beginning on page 2*

**M**y friends and fellow-countrymen—in the thirty-first year of my life I have been sentenced to die upon the gallows, and this sentence has been in pursuance of a verdict by twelve men who should have been indifferently and impartially chosen. How far they have been so, I leave to that country from which they have been chosen to determine; and how far they have discharged their duty, I leave to their God and to themselves. They have, in pronouncing their verdict, thought proper to recommend me as an object of humane mercy. In return, I pray to God, if they have erred, to have mercy upon them. The judge who condemned me humanely shed tears in uttering my sentence. But whether he did wisely in so highly commending the wretched informer who swore away my life, I leave to

his own cool reflection, solemnly assuring him and all the world, with my dying breath, that that informer was foresworn.

The law under which I suffer is surely a severe one—may the makers and promoters of it be justified in the integrity of their motives, and the purity of their own lives! By that law I am stamped a felon, but my heart disdains the imputation.

My comfortable lot, and industrious course of life, best refute the charge of being an adventurer for plunder; but if to have loved my country—to have known its wrongs—to have felt the injuries of the persecuted and to have united with them and all other religious persuasions in the most orderly and least sanguinary means of procuring redress—if

those be felonies, I am a felon, but not otherwise. Had my counsel (for whose honourable exertions I am indebted) prevailed in their motions to have me tried for high treason, rather than under the Insurrection Law, I should have been entitled to a full defence, and my actions would have been better vindicated; but that was refused, and I must now submit to what has passed.

To the generous protection of my country I leave a beloved wife, who has been constant and true to me, and whose grief for my fate has already nearly occasioned her death. I have five living children, who have been my delight. May they love their country as I have done, and die for it if needful.

Lastly, a false and ungenerous publication having appeared in a newspaper, stating certain alleged confessions of guilt on my part, and thus striking at my reputation, which is dearer to me than life, I take this solemn method of contradicting the calumny. I was applied to by the High-Sheriff to make a confession of guilt, and by the Rev. William Bristow, sovereign of Belfast, who used entreaties to that effect: this I peremptorily refused. If I thought myself guilty, I would freely confess it; but, on the contrary, I glory in my innocence.

I trust that all my virtuous countrymen will bear me in their kind remembrance, and continue true and faithful to each other, as I have been to all of them. With this last wish of my heart nothing doubting of the success of that cause for which I suffer, and hoping for God's merciful forgiveness of such offences as my frail nature may have at any time betrayed me into, I die in peace and charity with all mankind. ☺



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# Medicaid in Nevada

## Summer 2020 Rescue

### Part 1: Political Decisions *Daniel L. Orr II*

The proposed virtual elimination of all Medicaid mediated dental services in Nevada was fended off by NDA member dentists before the August 15 date for the terminations. The amount of work put in by the key NDA players, on a daily basis for months, is singular.

Included in this issue of the *NDAJ* is a timeline developed by Nevada's Chief Dental Officer Antonina Capurro, DMD, MSPH. The documents provided to the *NDAJ* by Dr. Capurro and others are much too voluminous to include in the *NDAJ*, but they are available for anyone to review if desired via Dr. Capurro at this time.

Other entities, such as the Adopt a Vet Dental Program (AAVD), participated in the effort, lending third-party validation

to dentist testimony during the machinations. Others worked effectively behind the scenes as will be noted in the *NDAJ* interview with Dr. Mark Glyman.

The impact of the loss of Medicaid Dental Services in Nevada for participating dentists is obvious. However, even for those that do not participate, the impact would have been significant. For instance, it has been estimated that up to 10% of all emergency room visits are dental related. Those patients are being triaged in large part through Medicaid resources. If Medicaid Dental Services ceased to exist, hospitals would refuse to assist these patients and their care would fall to the dental community directly. The refusal of Nevada dentists to treat this volume of patients would result in legislative action mandating such treatment,

gratis, for licensure, as has happened in other states.

Dentistry was not the only profession initially targeted. Please see the Nevada Department of Health and Human Services' (DHHS) ("Helping People. It's who we are and what we do") draconian proposed cuts 08 July 2020.

Sadly, the controversial, to some, prediction made by the *NDAJ* beginning in March, that the economically disastrous political responses would do much more harm than any perceived threat from this year's pedestrian virus, is now obviously true, ...and yet the politically mandated economic devastation continues.

1) Orr D, Kane's Caution, *NDAJ* 22:1, 2-4, Spring 2020.

2) Orr D, Johnny Carson, TP, and Memories of Woodstock, *NDAJ* 22:2, 2-5, Summer 2020.

# Together We Are Stronger

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Part 2: HHS Proposals

Steve Sisolak  
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Richard Whitley  
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State of Nevada  
Department of Health and  
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Special Session  
Proposed FY 2021 Budget Reductions  
July 8, 2020

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### Methodology & Prioritization of Reductions

Methodology:

1. Prioritize Direct Services and Staffing Required for Direct Service Delivery (reducing services versus entirely eliminating when available)
2. Maximize use of Coronavirus Relief Fund (CRF) dollars to support payroll expenses for staff substantially dedicated to responding to the COVID-19 public health emergency (i.e., Division of Welfare and Supportive Service, eligibility staff)

Prioritization:

1. FMAP Increase, Vacancy Savings and Reversions
2. Identify Alternate Sources of Funding (i.e., Federal and/or Fees)
3. Reduce or Eliminate One-Shots, Deferred Maintenance, and Operating Expenditures
4. Reduce Rate Increases, Freeze Caseload, and Eliminate Optional Services
5. Eliminate and/or Hold Positions Vacant
6. Eliminate Filled Positions and/or Layoff Staff
7. Eliminate Services and/or Positions

### DHHS Highlights

- Majority of DHHS budget reductions were largely due to leveraging the enhanced Federal Medical Assistance Percentages (FMAP) to protect and preserve Medicaid coverage to ensure continuous eligibility during the public health emergency
- Benefit of Coronavirus Relief Fund (CRF) dollars allowed the preservation of Welfare Eligibility Services
- DHHS did not propose eliminating any filled positions

### Budget Reduction Totals by Division

- Director's Office **\$18.4 M**
- Aging and Disability Services **\$30.2 M**
- Child and Family Services **\$9.4 M**
- Health Care Financing and Policy **\$140.4 M**
- Public and Behavioral Health **\$19.1 M**
- Welfare and Supportive Services **\$15.7 M**

**DHHS Total \$233 M**

### Director's Office Highlights

- Family Planning Services Reduction \$1.5M
- Healthy Nevada Fund Reserve Sweep \$16.8M

### Aging & Disability Services Division Highlights

- Maintain flat caseloads
  - Autism Treatment Assistance (ATAP) \$5.7M
  - Personal Assistance Program (PAS) \$415K
  - Community Options for the Elderly (COPE) \$264K
  - Regional Centers Supported Living arrangements (SLA) and Jobs and Day Training (JDT) \$3.9M
- Defer provider rate increase for supported living arrangement (SLA) \$2.9M
- Reduce Regional Center respite services from \$125 to \$100 per month \$527K
- Reduce Family Preservation Program (FPP) payments from \$374 to \$356 per month \$247K

### Aging & Disability Services Division Highlights

- Increased FMAP \$3.8M
- Freeze 138 vacant positions \$7.9M
- Elimination of travel and training \$13K
- Deferred facilities maintenance and operating costs \$498K





## Division of Health Care Financing and Policy Highlights

- Enhanced Federal Medical Assistance Percentage (FMAP)
- Decreased utilization due to pandemic
- Increases in caseload

## Division of Health Care Financing and Policy Highlights

- Limitation of Services:
  - Eliminate adult dental and limit dental services for pregnant women and children: (\$28.1 M)
  - Physical therapy for adults: limited to twelve sessions (\$1.2 M)
  - Hospice: eliminates certain duplicative services from being provided in the home (\$0.9 M)

## Division of Public and Behavioral Health Highlights

- Direct Service Programs
  - SNAMHS – \$8.4 M (freeze vacant positions, residential reductions)
  - NNAMHS - \$1.9 M (freeze vacant positions)
  - Rural Clinics - \$1.6 M (deferred start dates for personnel)
- One time appropriations and other savings
  - SB263 Tobacco prevention (\$1.5 M)
  - Problem Gambling (\$1.6 M)
  - Funds/Reserve Sweeps (\$2.3 M)



## Division of Health Care Financing and Policy Highlights

- Rate Reductions:
  - Six percent across the board rate reduction beginning August 2020, for projected state general fund savings of \$53 million through the end of SFY 2021.
- Additional Rate Changes:
  - Rate change for habilitation services: (\$0.3 M)
  - Defer rate increases from the 2019 legislative session that were implemented January of 2020:
    - Acute Hospital Services: 2.5% Increase (\$5.5 M)
    - Neonatal Intensive Care Services: 25% increase (\$5.2M)
    - Pediatric Intensive Care Services: 15% increase (\$0.5 M)
    - Personal Care Services: 3.3% Increase (\$1.2 M)
- Managed Care Changes:
  - Managed care risk mitigation payments will be delayed (\$22.5 M)
  - Managed care capitation payments will need to be recalculated, certified, and approved by CMS to reflect all approved budget reductions including rate changes eliminated service, and service limitations.



## Division of Health Care Financing and Policy Highlights

- Elimination of Optional Services:
  - Delay implementation of Tenancy Support Services: (\$1.3 M)
  - Biofeedback & Neuropathy (\$6.9 M)
  - Optometry for adults: (\$3.2 M)
  - Prosthetic Devices for Adults: (\$2.1 M)
  - Psychosocial Rehabilitation Services for Adults (\$1.6 M)
  - Basic Skills Training for Adults: (\$1.0 M)
  - Private Duty Nursing for Adults: (\$1.0 M)
  - Occupational Therapy for Adults (\$0.7 M)
  - Podiatry for Adults (\$0.5 M)
  - Behavioral Health Case Management for non SMI: (\$0.2 M)
  - Bariatric surgery for adults: (\$0.2 M)
  - Chiropractic services for adults (\$15K)



## Division of Welfare & Supportive Services Highlights

- Fund Salary Cost in Field Services for Eligibility Workers under the CARES Act for the period of July through December 2020 (\$14 M General Fund/\$26.5 M Other Funds)
- Reduce General Fund match in Child Support (\$1.1M)
- Administration (\$0.6 M)
  - Freeze sixteen vacant positions
  - Elimination of Travel and Training
  - Operating costs
  - Information Services



## Division of Child and Family Services Highlights

- Child Welfare (\$5,067,440)
  - Reduction in Washoe and Clark County Child Welfare Incentive Funds
  - Maintain vacancies in Rural Child Welfare
  - UNITY project costs transfer from General Fund to federal grant
- Juvenile Correctional Facility Budgeted Capacity (\$3,667,390)
  - Freeze 53 vacant positions
  - Caliente Youth Center – 112 beds to 64 beds
  - Nevada Youth Training Center – 64 beds to 48 beds
  - Summit View Youth Center – Maintain 48 beds
  - Total Capacity Change – 224 beds to 160 beds
- Child & Adolescent Services (\$635,707)
  - Freeze 11 vacant positions



## Part 3: Legislative Timeline *Antonina C. Capurro, DMD, MPH*



Antonina C. Capurro,  
DMD, MPH

In July, Nevada found itself in the midst of a fight to keep Medicaid dental benefits. To fill the 1.2 billion dollar budget shortfall, Governor Sisolak called for a Special Session of the Nevada Legislature on July 8, 2020. The Legislators were tasked with revising policies and approving fiscal cuts to Medicaid, education, and state departments.

### July 8

The 31st Special Session begins.

### July 9

AB3 which Makes various changes relating to state financial administration included service reductions and rate reductions for the Medicaid dental plan was introduced.

### July 9

Presentations on AB3 were provided by the Division of Health Care Financing and Policy.

### July 9

NDA submits public comment on the impact of AB3.

### July 10

Dr. Tongsiri began calling Medicaid providers to create a pool of practitioners that would provide public comment. Dr. Capurro wrote a daily digest which was emailed to NDA leadership, oral health stakeholders, and members of oral health coalitions as the bill made its way through the legislative process and provided educational background of the Medicaid system and the potential impact of AB3.

### July 13

Although the reductions and elimination of Medicaid services outlined in AB3 have not yet been finalized, public hearings have been scheduled to approve the adoption of changes to affected chapters. Public hearings for changes to Medicaid chapters and State Plan Amendments can be found here: <http://dhcfp.nv.gov/Public/AdminSupport/PublicNotices/>. (See the proposed changes highlighted below).

### July 15

AB3 heard in the Assembly.

### July 17

Amendments to AB3 proposed.

### July 18

Amendments proposed on AB3. Medicaid dental benefits were redacted from being reduced/cut, but a 6% rate reduction was still included in the bill.

The dental community came out in mass to voice opposition to AB3 both during public comment and in submitted letters. The final amendment to AB3 can be found on the bill's main page. Let me draw your attention to page 18, 22, and 34 which outlines the revised UNLV School of Dental Medicine budget, removes the proposed reduction and elimination of Medicaid dental benefits, and deletes reduction in the Adopt-a-Vet dental program. The amendment does, however, continue to include a 6% Medicaid rate reduction. This evening the bill as amended was heard in the Assembly and passed with 29 yeas and 13 nays. The bill now moves to the Senate.

### July 19

Special Session ended and AB3 passed as amended.

While the 31st Special Session has been a stressful two weeks, the passage of amendments to AB3 concluded the business of the Special Session. AB3 which originally proposed drastic cuts to Medicaid dental benefits was amended to remove the elimination of specific dental services. As passed, the bill will result in a 6% reduction in Medicaid reimbursement rates but does not place any additional restrictions on dental services. (Attached is a release from the Governor's Office on the outcomes of the session with highlighted dental areas.)

AB3 can be found here: <https://www.leg.state.nv.us/App/NELIS/REL/31st2020Special/Bill/7127/Overview>

We are almost seven months from the next scheduled legislative session, the 81st 2021 Session. Medicaid budgetary restrictions may be raised for discussion in that session.

## Proposed

### Managed Care and Quality Assurance Unit

#### Limitation of Child Dental Services to a Monetary Cap per Recipient.

*Limitation of Child Dental Benefits and Elimination of Adult Dental Benefits*

### Existing Policy

Nevada Medicaid provides dental services for most Medicaid-eligible individuals under the age of 21 as a mandated service, a required component of the Early and Periodic Screening, Diagnosis and Treatment (EPSDT)





benefit. For Medicaid-eligible adults age 21 years and older, dental services are an optional service, and adults may receive emergency extractions, palliative care, and may also be eligible to receive prosthetic care (dentures/partial) under certain guidelines and limitations. Additionally, Nevada Medicaid offers expanded dental services in addition to the adult dental services covered for Medicaid-eligible pregnant women. In order to reduce the risk of premature birth due to periodontal disease, pregnant women will be allowed dental prophylaxes, fluoride varnish, and certain periodontal and restorative services during pregnancy.

### Intended Change

Effective August 15, 2020, it is proposed to eliminate all dental benefits previously covered for adults, excluding pregnant women. Additionally, the child dental benefits will be limited to a monetary cap per year, which will cover a comprehensive examination and x-rays. Any additional dental benefits for children will be covered if deemed medically necessary under an EPSDT evaluation.

### Entities that may be financially affected by the proposed change

All dental provider types including: Dentists, dental hygienists, public health endorsed dental hygienists, dental therapists, periodontists, endodontists, orthodontists, and oral and maxillofacial surgeons. Additionally, Liberty Dental Health Plan the Medicaid contracted Dental Benefits Administrator for members residing in Clark and Washoe Counties.

### Potential financial impact, if any, upon local government

The anticipated fiscal impact is unknown at this time.

### Termination of the Dental Benefits Administrator Contract

*Termination of the Dental Benefits Administrator Contract held with Liberty Dental Health Plan.*

### Existing Contract

Requires Liberty Dental to receive a per member per month cost associated for dental services provided to Medicaid members residing in Washoe and Clark counties.

### Intended Change

Effective August 15, 2020, with the limitations proposed to dental benefits the state proposes to terminate the contract held with this vendor.

### Entities that may be financially affected by the proposed change

All dental provider types including: Dentists, dental hygienists, public health endorsed dental hygienists, dental therapists, periodontists, endodontists, orthodontists, and

oral and maxillofacial surgeons. Additionally, Liberty Dental Health Plan the Medicaid contracted Dental Benefits Administrator for members residing in Clark and Washoe Counties.

### Potential financial impact, if any, upon local government

The anticipated fiscal impact is unknown at this time.

Below is a list of some ideas that could be highlighted in a letter to illustrate the affects of AB3 on the dental school, the dental community, and ultimately on patient health.

1. With limited available services, Medicaid patients will be less likely to attend dental appointments making it more difficult for students to receive patient experiences.
2. Providers who rely on Medicaid pts (mostly pediatric practices) will need to rethink their business model or leave the state which will hurt our workforce and decrease access to care.
3. AB3 proposes additional administrative barriers to providers who must submit proof of medical necessity in order for patients to receive services.
4. The 6% across the board Medicaid rate reduction will be detrimental to SDM's mission to serve the community. It will also affect all other public health and community organizations that have already suffered under COVID-19 restrictions to dental offices and are burdened by the high cost of PPE.
5. Elimination of Liberty Dental Plan will also affect all value-added services ie. endodontic service contract with Dr. Lemon, dental cleanings for adults, outreach, CRA project, and Medicaid administrative support.
6. With new restrictions, school-based sealant programs will not be able to provide services in the classroom and without Medicaid coverage for vulnerable children decay will increase as access points disappear.

### Quotes from public comment

The proposed cuts to both education and Medicaid coverage for dental health care will devastate their quality of life and chances for future success.

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*Dr. Capurro is Nevada's State Dental Health Officer within the Nevada Department of Health and Human Services, and a Visiting Assistant Professor at the UNLV School of Dental Medicine. Dr. Capurro provides subject matter expertise across all divisions within the Nevada Department of Health and Human Services, facilitates activities to educate and increase access to care for the over three million citizens of Nevada, gathers oral health surveillance data, and revises and creates state policies that will expand access to quality oral health services for all Nevadans.*

*Dr. Capurro earned her DMD, MS Public Health, and MBA degrees from UNLV. Dr. Capurro is currently completing a Dental Public Health Residency Program at A.T. Still University and has applied for the diplomate status examination through the American Board of Dental Public Health. Dr. Capurro lives in Las Vegas with her husband and four young children.*

Part 4: Dr. Glyman Interview

Dr. Glyman is a board certified OMS who is licensed by both the NSBDE and the NSBME. He has practiced in Las Vegas for over 25 years. He practices full-scope OMS including volunteering for trauma call at UMC's Level I Trauma Center and Sunrise Hospital. Other clinical interests include: nerve repair, TMJ surgery, salivary gland surgery, and orthognathic surgery. He treats Medicaid patients for from odontalgia to major facial trauma regularly.



Mark Glyman, DDS, MD, FACS\*

**NDAJ**

Dr. Glyman thank you for agreeing to relate your role in the recent resurrection of Medicaid here in Nevada.

**Glyman**

You're welcome. I first received word from Dr. Amy Tongsiri at the beginning of July that the state was going to have a special session and during that special session the legislature planned to eliminate all benefits for dentistry for the Medicaid patients. These benefits include pediatric dental treatment such as extractions and infections and adult denture placement.

When I found out about these budgetary cuts, I made multiple phone calls and was fortunate enough to connect with three state senators. They work with the majority party and we're very interested in what I had to say. I was impressed with how accessible they were, and in addition noted their kindness and concern about the issue. I explained to them that this was a needed service unlike some of the other ancillary services which could be absorbed on the medical end (such as vision care and pediatric services). Unfortunately, they felt that since the state was in a \$1.2 billion deficit that

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these services could not be saved. I suggested they take out a short term loan with a commercial bank and the interest would be as low as 1–2 million dollars per month, but because of state laws, that idea was a non-starter. Yet, I expressed to them that these cuts were shortsighted, since it would cost the state more by getting rid of these benefits. These costs included

increased ER visits, increased hospitalizations, increased drug abuse, and increased COVID-19 exposure with associated costs. The senators were understanding, but at this point I felt that they were not going to help us in this matter.

**NDAJ**

Taking out a loan, you mean like real people do? Great idea, except they

can just raise taxes. Of course, that might be difficult since they fired my formerly tax-paying haircutters, who lost everything and won't be back, and many thousands more, for perceived but never realized COVID modeling threats. What happened next?

**Glyman**

I tried another approach. I reached out on the CEO of Southern Hills Hospital. I have been on the Board of Trustees of the hospital for a number of years, formally Chief of Staff of the hospital and Chief of Surgery. I had good rapport with her and expressed my thoughts. She understood clearly that elimination of necessary dental treatments would lead to increase utilization for the hospitals and they would have to absorb these uninsured costs. I did some rough calculators and found that the costs to the state may increase anywhere from \$70 million per year to \$700 million a year in uninsured costs. Both the hospitals and state would have to deal with these costs from uninsured dental patients going to the ER for both pain, medicines, and treatment of infections. The cuts also did not include many other issues such as the cost of individuals going back into drug treatment for the addiction problems that they beat by having their dental pain eliminated with treatment.

**NDAJ**

Yes, the *Journal* has spoken extensively about the unintended, at least to the politicians who passed AB474, consequences of their Prescription Drug Crisis reform in 2018. The next issue of the *NDAJ* will have a study showing that the incidences of addiction, overdose, illegal drug use, and more have all gone up significantly even as Nevada doctors were legislated into a virtual impossibility to write a legal Rx for controlled substances. So, it appears the major players, the hospitals, got it?

**Glyman**

Yes, the hospitals felt that this was an immediate need and would affect their financial position negatively. The Nevada Hospital Association became

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involved. This powerful lobby got began contacting individual senators and assembly members. I believe it was the hospital help that convinced the legislature to get all of the dental benefits restored.

### **NDAJ**

How about the efforts of the NDA and our Chief Dental Health Officer Dr. Capurro?

### **Glyman**

I was privy to the discussions at the first legislative session when they had open comment. There were eloquent and passionate pleas from many of our dental colleagues including Dr. Capurro. In addition there were many emails sent in support of our position including one that I included which expressed my concerns for the unintended consequences of their actions in this bill.

I found out that on Sunday that the dental benefits were restored in full in the final bill. It is my belief that the Nevada Hospital Association should be a given a great deal of the credit for this outcome. In addition, the calls and letters from our individual dental colleagues were invaluable once everyone realized the significant dental presence in hospitals. I was pleased at that individual assembly members, state senators, and the Governor did the right thing.

### **NDAJ**

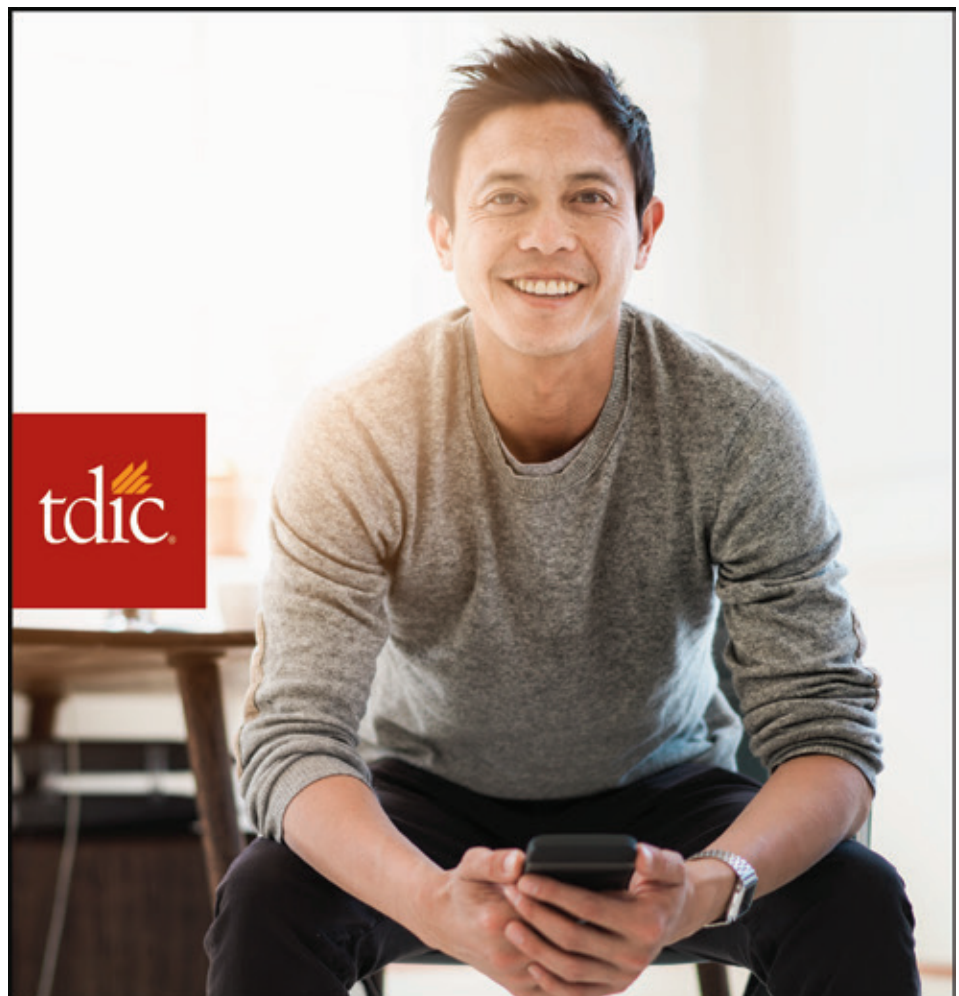
Was there a trade-off for the Nevada Hospital Association?

### **Glyman**

They, along with medical doctors, took a 6% cut in Medicaid benefits rather than a possible 2% cut. Yet, it is my feeling that they had a better insight into what was going on. They did the calculations too and in the end they were invaluable in restoring the dental benefits to the neediest members of our state.

### **NDAJ**

Mark, thank you so much, and the NDAJ appreciates the interview too. 🦷



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- **Awards**
- **Golfer Gifts**



**7:00 A.M.**  
Breakfast & Golfer Check-in

**8:00 A.M.**  
Shotgun Start/Tee Time

**12:30 P.M.**  
BBQ Lunch, Raffle Winners &  
Awards (est. time)

**Format:** Scramble

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Michele M. Reeder

# Executive Director's Fall Message

It is with much excitement and enthusiasm that I am able to share with you my appreciation of the opportunity to serve you and the NDA. My roots in Nevada go back many years, and I understand what it is like to operate a business and serve the Nevada community. Even in a pandemic, Nevada is strong.

Even in the midst of change and uncertainty, I am optimistic. Dental medicine is part of the fabric of healthcare in Nevada and overall, patients trust their dentists and are ready to visit their dental office (See page 22 of the PDF linked below\*). Even with the uncertainty, dental medicine is still near the top of patient and consumer priorities.

It is this uncertainty when being part of a healthcare community really matters. The NDA is transforming itself in a variety of ways. Part of this is a change in Executive Director and location. A huge thank-you to Dr. Robert Talley for giving some 15 years of leadership and support to the NDA. Our ability to move forward is based in part by recognizing where we've been. The other significant change is the NDA is moving its office to Carson City. This move will position the NDA right in the middle of legislators and policy makers so the NDA can be quick to respond to challenges and to

offer NDA support to policies and rules that could impact Nevada dentists that arise during the legislative session.

You will also see some changes in how the NDA communicates with its members. As a small staff association, we must be nimble and targeted in our efforts. My plan is to conduct a variety of outreach to members and our partners to learn what is important to you now and how the NDA can help. Being part of the NDA means you have taken steps to build lifelong relationships with your dental colleagues and we appreciate your trust and support.

In the weeks and months ahead, we will be transforming ourselves, keeping an eye on the rich traditions and foundation that formed the NDA, while keeping us relevant and contemporary to ensure we are meeting the needs of our members—past, present, and future.

Thank you to Dr. Talley, the NDA staff, and the NDA Executive and Search Committees for giving me this opportunity to serve the NDA. We are excited at what the future holds, but we understand we must work together to get through these challenging times. Together we can do this! 🤝

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In the weeks and months ahead, we will be transforming ourselves, keeping an eye on the rich traditions and foundation that formed the NDA, while keeping us relevant and contemporary to ensure we are meeting the needs of our members.

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\*A Special Webinar from the ADA How COVID-19 is Impacting Dental Practices and Patient Attitudes Toward Visiting the Dentist, August 5, 2020, [https://www.ada.org/-/media/ADA/Science%20and%20Research/HPI/Files/HPI\\_COVID\\_Webinar\\_Aug\\_2020\\_1.pdf?la=en](https://www.ada.org/-/media/ADA/Science%20and%20Research/HPI/Files/HPI_COVID_Webinar_Aug_2020_1.pdf?la=en)



# President's Fall Message

I hope this message finds you safe, healthy, and moving forward as you resume essential care to your patients. Due to the COVID-19 health crisis and the ever changing Federal and State restrictions, guidelines, etc.; there have been an overwhelming number of changes, whether it be the way we practice dentistry or how the NDA conducts meetings at the local, state and national levels. The NDA Executive Committee has changed to Zoom video conferencing. The American Dental Associations has cancelled the Dentists and Student Lobby day in Washington DC and the Western States Conference in Monterey, CA. The 14th District Caucus I in Salt Lake City, Utah; the President-Elect conference; the ADA Management conference and the ADA Management conference currently have all been changed to a Zoom conferencing format. The format for ADA Caucus II & III as well as the ADA Annual Meeting is currently being discussed.

I hope this article finds all of you well and ever so slowly, step by step, one day at a time making forward progress towards normalcy of life and business.

A lot continues for our beloved Association. One could say that a rebranding of the Nevada Dental Association is taking place. The NDA building in Las Vegas is currently in escrow, a lease has been signed for the new location in Carson City, and a new Executive Director has been hired. The NDA House of Delegates have voted to move the NDA office North to Carson City to provide for easier, quicker, and more productive access to the legislature.

I would like to "thank" the NDA office relocation adhoc committee: Dr. Erin Anderson, Dr. Robin Lobato, Dr. Aimee Abittan, Dr. Greg Hunter, Dr. Ed DeAndrade, and Mrs. Lori Benvin. Their research, evaluation, and recommendations regarding the selling of the

NDA office building and the new office location was invaluable and extremely well thought out.

A new Executive Director has been hired; Michele Reeder. See her first report in this issue to learn more about her.

I would like to send out a huge "thank you" to the Executive Director search adhoc committee: Dr. Michael Banks, Dr. Rick Dragon, Dr. Tina Brandon, Dr. Maggie Heinen, Dr. John DiGrazia, and Dr. Gilbert Trujillo. This committee was absolutely amazing to work with. This group provided so much historical knowledge, insight, and passion. This search committee worked directly with Kittleman and Associates; countless applications were submitted and reviewed. Of those applications, only eight applicants were chosen. Zoom interviews were conducted, and four applicants remained. Another zoom interview session was conducted, and one person was selected. The search committee then presented their recommendation to the NDA EC. After a lengthy Q&A session, the recommended applicant was accepted by the EC, and an in person meet and greet with the prospective ED was held. The prospective ED was ratified that day by the EC with a unanimous yay.

Mrs. Reeder will begin September 14. She will spend the first few days in Las Vegas with Dr. Talley and Ms. Suzzi Fobbs as part of the transition.

The NDA Summer House of Delegates met in June via video conference. This was the first time the house had met through a video format. Other than a couple of hiccups (adjustments made to the voting protocol and technical difficulties had by two delegates), the meeting went extremely well. The usual two-day meeting took place on one day since the strategic planning portion had to be postponed due to the COVID-19 situation. The strategic planning session will take place



**Mark Funke, DDS**



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## NDA President's Message



with our Fourteenth District Trustee (Brett Kessler) and our ADA outreach manager (Autumn Wolfer). This session is best accomplished with everyone in attendance. Plans are underway to get the strategic planning session rescheduled for this fall.

### Dr. Bob Talley,

Thank you for all your love for organized dentistry, your passion for patient care, your dedication, your historical knowledge, and your mentorship. Your years of commitment has done a great service for organized dentistry, member dentists and the people of Nevada. You have made a difference and you have definitely left your mark on the world.

But people, do not fret—Bob isn't going anywhere. Even though he will no longer be our Executive Director, he has always been, and will remain an NDA member. He continues to be actively involved with the Council on Government Affairs as well.

I hope to see all of you soon. Take care and thank you for the support and trust you have in me. It is an honor and a pleasure to serve as your president. 🦷

# NDA Calendar of Events



<b>2020</b>			
9/14	Executive Committee	Zoom	6pm
10/12	Executive Committee	Zoom	6pm
10/15	ADA HOD 1st Meeting	Zoom	7:30-10am
10/15	Reference Committee #1	Zoom	12-1:30pm
10/15	Reference Committee #2	Zoom	1:45-3:15pm
10/16	Reference Committee #3	Zoom	7:30-9am
10/16	Reference Committee #4	Zoom	9:30-11am
10/17-18	District Caucus Meetings	Zoom	TBA
10/19	ADA HOD Second Meeting	Zoom	7-10am
10/19	ADA HOD Third Meeting	Zoom	11am-Close
11/9	Executive Committee	Zoom	6pm
11/11	Veteran's Day	Office Closed	
11/26-27	Thanksgiving Holiday	Office Closed	
12/3-5	ADA Lobbyist Conference	Zoom	TBA
12/7	Executive Committee	Zoom	6pm
12/24-25	Christmas Holiday	Office Closed	
12/31-1/1/21	New Year's Holiday	Office closed	
<b>2021</b>			
1/4	Executive Committee	Zoom	6pm
1/16	NDA Midwinter HOD		TBA
1/18	Martin Luther King Day	Office Closed	
2/1	Executive Committee	Zoom	6pm
2/15	President's Day	Office Closed	
3/1	Executive Committee	Zoom	6pm
4/5	Executive Committee	Zoom	6pm
5/3	Executive Committee	Zoom	6pm
5/31	Memorial Day	Office Closed	
6/7	Executive Committee	Zoom	6pm
6/17	Executive Committee	Grand Sierra Resort, Reno	5pm
6/17-6/19	NDA Summer Meeting	Grand Sierra Resort, Reno	
7/6	July 4th observed	Office Closed	
7/13	Executive Committee	Zoom	6pm



Monica Rexus

monica.rexius@sndsonline.org

# SNDS Executive Director's Fall Message

**F**all is here! I hope you and your families have been able to make the most out of summer. We have had to make quite a few changes to our normally scheduled events. We will not be having any in person meetings until 2021. Our Community Night has also been rescheduled to September of 2021.

We are planning a SNDS Day of Dental Service for November 7, 2020 at 9:00 am to 3:00 pm. During this time, members of the community facing financial hardship can come to a volunteer's office and get one free filling or one free extraction. We are inviting you to participate in this service day by contributing your time and effort. It is important that volunteer dentists understand the following guidelines:

1. The scope of our effort is one free filling or extraction for those in need. Complex treatment is not the goal.
2. Volunteers will need to provide their own offices, materials, and staff for the day. Some limited supplies may be available but should not be depended upon.

Also, staff may volunteer their time but should not be coerced into doing so.

3. Some record of services provided should be maintained. We would like to be able to report on the service activity of our dental community.

As there will be a number of general dentists and specialists from around the valley participating and we will need to coordinate referrals for that day. We are asking for a commitment to volunteer by September 8, 2020.

In other news, we have relocated our office. We are now located at: 9205 W. Russell Rd. Suite 240, Las Vegas, NV 89148. Our phone number has changed to 702-793-4455.

Thank you to those who have renewed their membership for 2020, we appreciate your support for organized dentistry at the national, state, and local levels! We are here to support you and help you succeed. If you ever have any questions or suggestions please feel free to reach out. 🦷

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# SNDS President's Fall Message

I graduated from the University of Louisville School of Dental Medicine (Go Cards!) in May of 2002. Eight months earlier, during our morning clinic, most of us drifted away from our patients into the simulation lab and watched as airplanes crashed into skyscrapers. We stared in shocked disbelief as the first, and then the second, of the World Trade Center towers collapsed. We didn't understand what we were seeing and had no idea what the future would hold. The world changed that day. Easy things became hard. Later, I remember my wife traveling with our two kids to see her parents. She called me in tears after running the gauntlet of TSA. She swore she would never fly again.

Having been class president, I was asked to speak at graduation. I thought of our journey as dental students, especially the changes to daily life during our senior year. I thought of the challenges we would face and what I could say about our future. In preparing my address, I came across a quote by Albert Einstein. He said, "Not everything that can be counted counts, and not everything that counts can be counted." It was a good reminder that despite our student loans, pending job offers, and postgraduate plans, there are intangible things that make us human that cannot always be quantified.

Today the world has changed again, and every one of us are affected. Simple things are hard. Going out to dinner or to the grocery store require special steps and precautions. Simple pass times like going to the movies or Knight's game aren't even possible right now. Conventions, continuing education classes, and other special events have been cancelled or postponed (our own Community Night is one such casualty). And without question, each one of our practices has been impacted financially.

So what about those things that can't be quantified? Do they still matter? And if they do, how can we make them matter? I think back to those months after 9/11, and I am struck by how much everyone cared about each other. Lending someone a helping hand became the new normal. Looking out for our neighbors was common. Everyone seemed to understand that life was short and we needed to make the best out of every day because we didn't know what tomorrow held.

I think kindness, compassion, and friendship still matter most. Tomorrow is uncertain, now more than ever. A smile or a kind word or helping hand will bring our community closer together. As health care providers, we are in a unique position to help, especially with the current crisis in front of us. We can educate, inform, and most importantly serve.

The Southern Nevada Dental Society is organizing a Day of Dental Service. We are asking member dentists to donate their time and resources Saturday, November 7 to treat members of our community in financial need. We are organizing our efforts so that we can provide a filling or extraction to those needing help. We are also organizing specialists that will be able to assist our efforts. If you would like to donate your time and services, please contact the SNDS office for information on how to help.

The world will continue to change. There will certainly be more challenges in the future. Take the time to invest in those things that cannot be counted. Even if you aren't able to participate November 7, make an effort to be a good human being. Be friendly. Be caring. Greet people with a smile and ask them their name. After all, this is 2020, and you never know what tomorrow will bring. 🍷



**Gregory Hunter, DMD**

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**I think kindness,  
compassion, and  
friendship still  
matter most. A smile  
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helping hand will  
bring our community  
closer together.**

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**Lori Benvin**  
nnds@nndental.org

# News from the Northern Nevada Dental Society

Since the *NDA Journal* is now going digital, I find it even more challenging to share news to celebrate. While the reopening of dental offices has been great news for our members, their dental teams, and certainly their patients on May 4 it is blatantly difficult to turn on any news source and not be devastated by what is happening in our country and to this country. The digital age has been here, and we have all had to become adapt and dependent upon it solely since March 2020; a year we all would like to forget. Zoom, webinars, emails, texting, and conference calls have become our communication vehicles, but I still like the old models and hope to return to many of our traditional meetings *in person* in 2021.

We, unfortunately, made the difficult decision to postpone our annual NNDS Open House BBQ, hoping only to postpone it until spring 2021. Our October general membership dinner meeting and all-day CE in October is also postponed until 2022 with Dr. Greg Psaltis. We are keeping the November 12, 2020 dinner meeting on the books for now as we are hopeful our Governor's directives will not become

even more restrictive. For now, check our website and watch for upcoming information on that meeting and those to follow in 2021.

Our Executive Board is setting up a Zoom meeting or two in the very near future for our members to talk about what *you* want to talk about, share ideas, what have you and your practice been struggling with, what do you need help with, and maybe share a glass of wine virtually. Join us, won't you?

We still hope to come together again as a society in person and returning to our schedule of successful and informative general membership dinner meetings and continuing education opportunities. Check your association websites: [www.ada.org](http://www.ada.org), [www.nvda.org](http://www.nvda.org) and our website at [www.nndental.org](http://www.nndental.org) for valuable information for you and your practice. It is also currently open enrollment for our Association Health Plan with Prominence Health. For more information, email me, and I can send you the benefit guide, watch for a new link to be added to our website, or contact our association health plan broker Jeff Lybolt at 1-888-550-9086 or [jeff@insuringeverything.com](mailto:jeff@insuringeverything.com). 🍷

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## Welcome Newest NNDS Members

**Pooja Mehta, DDS, MPH – General**  
**Gary Wilcox, Jr., DMD – Oral Surgeon**

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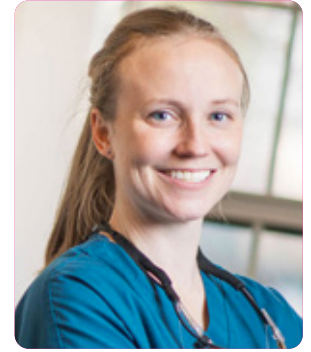
# NNDS President's Fall Message

F all is an amazing time in Northern Nevada. Following summer festivals, barbecues, and kicking off our open house picnic, there is a wonderful sense of community as the society moves into a year of networking and CE events. Like most things in 2020, these events have been postponed. Our leadership team has continued to meet and brainstorm how we can support our members and continue to be a driving force of good for oral health in Nevada.

“Are you thinking what I’m thinking?” has quickly become one of my daughter’s favorite phrases. I am almost never thinking what she’s thinking. For the 100th time she can’t have ice cream for breakfast or stay up late, but her question has recently made me pause. When she asks me what I’m thinking, my head spins into things that need to be done at the dental office, grocery lists, house projects, etc. For her, she just thinks about the immediate. What can she

do right now (or get away with right now) and what will make her happy. We work a lot on gratitude with our kids and I hope being grateful and thinking of others will start to show even more in what she wants. Kids often serve as a great reminder to pause and enjoy what we can in the moment. I am optimistic that we will all be able to meet again and share in our experiences of what this time has meant to us all.

For the immediate, we will be focusing on connecting virtually through zoom calls with the NNDS board. We will also be reaching out to all membership on ways to connect and find leadership roles that help strengthen the NNDS. If you’ve been in the background and want to become more involved, please reach out! Thank you to all of our amazing members who continue to serve and support our wonderful society. And who knows, maybe tomorrow I’ll be thinking of ice cream for breakfast. 🍦



Erin Anderson, DMD

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**Our leadership team has continued to meet and brainstorm how we can support our members and continue to be a driving force of good for oral health in Nevada.**

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## FROM THE DEAN

**Lily T. García, DDS, MS, FACP**

The fall semester began filled with optimism for the Class of 2021 beginning its D4 year along with rising D3s and D2s, while welcoming the Class of 2024. In September, the 85 first-year students who comprise the class of 2024 were selected from more than 1,600 submitted applications. The cohort has a cumulative grade point average of 3.56, and an average age of 23.5. Approximately 57 percent of the students live in, or are from, Nevada. The start of the academic year differs from years past, but staff and faculty are committed to continuity of curriculum and the best possible experiences, albeit behind masks.

Our Advanced Education in Orthodontics and Dentofacial Orthopedics program welcomed six new residents in July. Two of the students graduated from UNLV School of Dental Medicine, two from University of the Pacific, one from Creighton University, and one from University of Michigan. The program has an active research program in several areas including clear aligners,

which has led to new approaches and protocols, and applications of botulinum toxin.

We held our Student Research Elective Program during the summer term, which enables predoctoral students to engage in oral health-related research supervised by faculty mentors. This year, 37 first-year, 24 second-year, and 7 third-year students took part in the elective, addressing topics in materials science, cell biology, microbiology, and others. Results from these projects are presented as abstracts during the school's annual Student Research Day Symposium, and a selection of them are then submitted for the annual AADR conference.

The school received external funding for faculty research including a \$25,000 Centers of Biomedical Research Excellence (COBRE) pilot grant to further develop a tool that uses drug-free oxidant-generating technology to remove biofilms from dental pulp, and R56 grant from the National Institute of Dental and Craniofacial Research to study the oral microbiome and oral responses in

young individuals using a nonhuman primate model of the disease.

The school also received a \$50,000 grant from the Delta Dental Community Care Foundation to support our efforts in the fight against COVID-19, related crises, and to advance access to care for those in need.

Something I am especially proud of—thanks to the diligence, innovation, and collaboration of the faculty and staff, and determination by the students—is that all class levels matriculated through the curriculum. Every change that was necessary to ensure continuity of curriculum was carefully reviewed internally and was officially approved through the Commission on Dental Accreditation. During the quietest of times, core staff and faculty worked relentlessly knowing we followed all CDC, national, and state safety measures to continue to educate, work, and support the integrity of the educational programs. I am privileged to work with faculty who demonstrated agility and commitment as evidenced by their creativity and support for our students. Our staff members adopted new work hours and high expectations, and trained to provide essential duties in support of evolving clinical and safety protocols, all in support of our students.

As our state and community of people work through what lies ahead, UNLV Dental Medicine pushes forward on behalf of our students, who through education in an outpatient healthcare facility, become professionals improving the oral health of our patients. 🦷



UNLV SDM Faculty member Dr. Rhodna Everet and student Sarah Pham.

# Administrative Offices

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